# **Application Data Sheet Application Information**

Application Type::

Regular

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

None

Number of CD disks::

0

Number of copies of CDs::

0

Sequence submission?::

No

Computer Readable Form

No

(CRF)?::

Number of copies of CRF::

0

Title ::

PHONE HOLDER ASSEMBLY

Attorney Docket Number::

HRA-12807

Request for Early Publication?::

No

Request for Non-Publication?::

No

Suggested Drawing Figure::

Fig. 1

Total Drawing Sheets::

6

Small Entity?::

No

Latin name::

. Variety denomination name::

Petition included?::

No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent

No

Appl.?::

## **Applicant Information**

	Applicant Authority Type::	Inventor
	Primary Citizenship Country::	
	Status::	Full Capacity
	Given Name::	Neal
	Middle Name::	W.
	Family Name::	Luginbill
	Name Suffix::	
	City of Residence::	
	State or Province of Residence::	
<b>4</b>	Country of Residence::	
	Street of mailing address::	
y	City of mailing address::	
Non that and down free hast hat help fin	State or Province of mailing address::	
	Country of mailing address::	
	Postal or Zip Code of mailing address::	
<u></u>		
Com that if it that the that	Applicant Authority Type::	Inventor
4	Primary Citizenship Country::	
	Status::	Full Capacity
	Given Name::	Taro
	Míddle Name::	
	Family Name::	Shimokobe
	Name Suffix::	
	City of Residence::	
	State or Province of Residence::	,
	Country of Residence::	
	Street of mailing address::	

	Country of mailing address::	
	Postal or Zip Code of mailing address::	
	Applicant Authority Type::	Inventor
	Primary Citizenship Country::	
	Status::	Full Capacity
	Given Name::	Yuri
	Middle Name::	
	Family Name::	Starik
i pás	Name Suffix::	
	City of Residence::	
Ų	State or Province of Residence::	
V	Country of Residence::	
	Street of mailing address::	
	City of mailing address::	
	State or Province of mailing address::	
	Country of mailing address::	
	Postal or Zip Code of mailing address::	
U		
	Applicant Authority Type::	Inventor
	Primary Citizenship Country::	
	Status::	Full Capacity
	Given Name::	Marek
	Middle Name::	

City of mailing address::

Family Name::

Name Suffix::

City of Residence::

State or Province of Residence::

State or Province of mailing address::

Myszkowski

Country of Residence::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

#### Correspondence Information

Correspondence Customer Number ::

0027505

Phone number::

216-566-9700

Fax Number:

216-566-9711

E-Mail address::

spaw@rankinhill.com

### Representative Information

Representative Customer	0027505	
Number::		

Number::	istomer	0027505			No.	
rita. Brian Brian						
Domestic Priority Information  Application:: Continuity Type:: Parent Application:: Parent Filing Date::						
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Foreign Prior						
Forcian Drien	ity Inform	otion				
Toleigh Phor	ity iiiiOiiii	alion				

Country::	Application number::	Filing Date::	Priority Claimed::
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### **Assignee Information**

Assignee name:: Honda Giken Kogyo Kabushiki Kaisha

Street of mailing address:: 1-1, Minamiaoyama 2-chome

City of mailing address:: Minato-ku, Tokyo

State or Province of mailing address::

Country of mailing address:: Japan

Postal or Zip Code of mailing address::